

SECTION 401 WATER QUALITY CERTIFICATION APPLICATION FORM

1. APPLICANT INFORMATION

Applicant:	Agent:
Contact Name:	Contact Name:
Address:	Address:
Phone No:	Phone No:
Fax No:	Fax No:

3. PROJECT DESCRIPTION

_____ acres _____ linear feet (*if appropriate*)

4. IMPACTED WATER BODIES

a) Name(s) of Receiving Water(s):

b) Anticipated stream flow during project activity:

c) Describe potential impacts to water quality:

d) Indicate in ACRES and LINEAR FEET (*where appropriate*) the proposed **waters of the United States** to be impacted by any discharge other than dredging, and identify the impacts(s) as permanent and/or temporary for each water body type listed below:

Water Body Type	Permanent Impacts		Temporary Impacts	
	(acres)	(linear feet)	(acres)	(linear feet)
Jurisdictional Wetland				
Riparian				
Streambed unvegetated				
Lake/Reservoir				
Ocean/Estuary/Bay				

e) Indicate the volume of the dredged material (cubic yards) to be discharged to waters of the United States:

f) Indicate type(s) of material proposed to be discharged to waters of the United States:

5. COMPENSATORY MITIGATION

a) Indicate in ACRES and LINEAR FEET (*where appropriate*) the total quantity of **waters of the United States** proposed to be Created, Restored and/or Enhanced for purposes of providing Compensatory Mitigation:

Water Body Type	Created		Restored		Enhanced	
	(acres)	(linear ft.)	(acres)	(linear ft.)	(acres)	(linear ft.)
Jurisdictional Wetland						
Riparian						
Streambed						
Lake/Reservoir						
Ocean/Estuary/Bay						

b) If contributing to a Mitigation or Conservation Bank, indicate the agency, dollar amount, acreage, and water body type (*if applicable*): Conservation Agency _____

\$ _____ for _____ acres of _____ (*water body type*)

How many acres of this mitigation area qualify as waters of the United States? _____

c) Other Mitigation (*omit if not applicable*):

How many acres of this mitigation area qualify as waters of the United States? _____

d) Location of Compensatory Mitigation Site(s) (*attach map of suitable quality and detail*):

City or Area: _____ County: _____

Longitude/Latitude: _____ Township/Range: _____

6. OTHER ACTIONS/BEST MANAGEMENT PRACTICES (BMPs)

Briefly describe other actions/BMPs to be implemented to avoid and/or minimize impacts to waters of the United States, including preservation of habitat, erosion control measures, project scheduling, flow diversions, etc.

7. OTHER PERMITS/AGREEMENTS

a) U.S. Army Corps of Engineers Permit

Indicate the type of ACOE permit (*check one*): Nationwide Permit No(s): _____
Individual Permit No(s): _____ Regional Permit No(s): _____

Have you notified ACOE of project? _____

Have you reviewed the General Conditions for your ACOE permit? _____

Have you attached a copy of the application/notification to ACOE? _____

b) California Department of Fish and Game Lake or Streambed Alteration Agreement

Date of Application: _____

Have you attached a copy of the application? Yes _____ No _____

Has the Agreement been issued? _____ if so, list Agreement number: _____

8. CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA)

a) Indicate the type of CEQA Document required for project and Lead Agency:

Categorical Exemption ____ Negative Declaration ____ Environmental Impact Report ____

Has the document been certified/approved, or has a Notice of Exemption been filed*? ____

If yes, date of approval/filing: ____ If no, expected approval/filing date: ____

Lead Agency: ____

Submit final or draft copy if available*

b) Threatened or Endangered Species impacted by this project (*list all potential species*):

9. PAST/FUTURE PROPOSALS BY THE APPLICANT

Briefly list/describe any projects carried out in the last 5 years or planned for implementation in the next 5 years that are in any way related to the proposed activity or may impact the same receiving body of water. Include the estimated adverse impacts from the past or future projects.

Applicant's Signature (*or Agent*)

Date